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11/22/2005 EBURNS 00000001 022666 10696145

01 FC:2201 100.00 DA



Atty. Docket No.: 003364.P141

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re the application of:)
Sun-Hyok Chang et al.) Examiner: BOLDA, ERIC L
Serial No.: 10/696,145)
Filed: October 28, 2003)
FIBER AMPLIFIER AN CONTROL METHOD THEREOF)

RESPONSE TO OFFICE ACTION

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450
Box No-Fee Amendment

Dear Sir:

In response to the outstanding Office Action mailed September 27, 2005, Applicant hereby elects Species I: a fiber amplifier with an automatic gain controller. The claims readable on the elected species are claims 1, 4-9, 13, 15, 16 and 20.

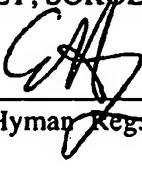
REMARKS

Claims 1-21 are pending in the present application. Applicants elects Species I for prosecution. Claims 1, 4-9, 13, 15, 16 and 20 are readable on the elected species. Applicants request withdrawal of claims 2, 3, 10-12, 14, 17, 18 and 21 from consideration.

Respectfully submitted,

BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN

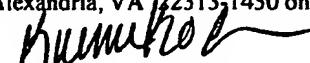
Date: 11/10, 2005

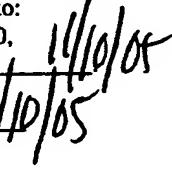
By: 

Eric S. Hyman Reg. No. 30,139

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on

 Kumiko Alexander

 Date 11/10/05

12400 Wilshire Boulevard
Seventh Floor
Los Angeles, California 90025
(310) 207-3800

NOV 16 2003
USPTO

FEE TRANSMITTAL for FY 2005		<i>Complete if Known</i>	
<small>Patent fees are subject to annual revision.</small>			
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.		Application Number 10/696,145 Filing Date October 28, 2003 First Named Inventor Sun-Hyok Chang Examiner Name Bolda, Eric L Art Unit 3663 Attorney Docket No. 3364P141	
TOTAL AMOUNT OF PAYMENT (\$)			

METHOD OF PAYMENT (check all that apply)

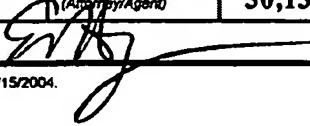
Check Credit card Money Order None Other (please identify): _____
 Deposit Account Deposit Account Number: **02-2666** Deposit Account Name: **Blakely, Sokoloff, Taylor & Zafman LLP**

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee
 Charge any additional fee(s) or underpayment of fee(s) Credit any overpayments
under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.

FEE CALCULATION

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee Code		
(\$)	(\$)		
1051	2051	Surcharge - late filing fee or oath	
1052	2052	Surcharge - late provisional filing fee or cover sheet.	
2053	2053	Non-English specification	
1251 120	2251 60	Extension for reply within first month	
1252 450	2252 225	Extension for reply within second month	
1253 1,020	2253 510	Extension for reply within third month	
1254 1,590	2254 795	Extension for reply within fourth month	
1255 2,160	2255 1,080	Extension for reply within fifth month	
1401 500	2401 250	Notice of Appeal	
1402 500	2402 250	Filing a brief in support of an appeal	
1403 1,000	2403 500	Request for oral hearing	
1451 1,510	2451 1,510	Petition to institute a public use proceeding	
1460 130	2460 130	Petitions to the Commissioner	
1807 50	1807 50	Processing fee under 37 CFR 1.17(q)	
1806 180	1806 180	Submission of Information Disclosure Stmt	
1809 790	1809 395	Filing a submission after final rejection (37 CFR § 1.129(a))	
1810 790	2810 395	For each additional invention to be examined (37 CFR § 1.129(b))	
Other fee (specify) _____			
SUBTOTAL (2)			(\$)

SUBMITTED BY		<i>Complete if applicable</i>		
Name (Print/Type)	Eric S. Hyman	Registration No. (Attorney/Agent)	30,139	Telephone (310) 207-3800
Signature			Date	11/18/05

PATENT APPLICATION FEE DETERMINATION RECORD
Effective December 8, 2004

10/696145

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

TOTAL CLAIMS		
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	minus 20=	*
INDEPENDENT CLAIMS	minus 3 =	*
MULTIPLE DEPENDENT CLAIM PRESENT		<input type="checkbox"/>

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

AMENDMENT A	11/12/07	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
		Total	Minus	** 21	= 1
Independent	* 5	Minus	*** 4	= 1	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>					

fee pd. in full)

SMALL ENTITY
TYPE

OTHER THAN
SMALL ENTITY
OR

RATE	Fee	RATE	Fee
BASIC FEE	150.00	OR BASIC FEE	300.00
X\$ 25=		OR X\$50=	
X100=		OR X200=	
+180=		OR +360=	
TOTAL		OR TOTAL	

SMALL ENTITY OR OTHER THAN
SMALL ENTITY

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 25=		OR X\$50=	
X100=	100	OR X200=	
+180=		OR +360=	
TOTAL ADDIT. FEE	100	OR TOTAL ADDIT. FEE	

AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
		Total	Minus	**	=
Independent	* 5	Minus	***	=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>					

RATE ADDI-
TIONAL
FEE

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 25=		OR X\$50=	
X100=		OR X200=	
+180=		OR +360=	
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	

AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
		Total	Minus	**	=
Independent	* 5	Minus	***	=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>					

RATE ADDI-
TIONAL
FEE

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 25=		OR X\$50=	
X100=		OR X200=	
+180=		OR +360=	